


# PAEDIATRIC LUMBAR PUNCTURE (LP) CHECKLIST

SIGN IN <i>To be completed by the individual conducting the procedure prior to scrubbing</i>	TIME OUT <i>To be read out loud by the assistant before invasive part of procedure is commenced</i>	SIGN OUT <i>To be read out loud by the operator before anyone leaves the procedural area</i>
<input type="checkbox"/> Confirm all individuals have introduced themselves. <input type="checkbox"/> Confirm patient identity and procedure.	<input type="checkbox"/> Confirm the operator is wearing sterile gloves after scrubbing.	Specify number of needles/attempts:
<b>Clinical setting:</b> <input type="checkbox"/> Elective <input type="checkbox"/> Emergency <b>Record indication:</b> <input type="checkbox"/> Meningitis <input type="checkbox"/> Encephalitis <input type="checkbox"/> SAH <input type="checkbox"/> Other, specify:	<input type="checkbox"/> Confirm skin cleaned with tinted Chloraprep 2% in 70% alcohol and allowed to dry for 3 minutes.	<b>Any immediate complications?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes, specify:
<b>Does the patient have a known allergy?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes, specify:	<b>Record needle type and gauge:</b>	<b>Confirm:</b> <input type="checkbox"/> Sterile stylet replaced before removing LP needle. <input type="checkbox"/> Pressure applied with sterile swab. <input type="checkbox"/> Opsite spray applied to puncture site. <input type="checkbox"/> Leakage from site ceased and dressing applied. <input type="checkbox"/> Operator disposes all sharps safely.
<b>CT head indicated?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes If YES, is report formal/verbal? <input type="checkbox"/> No <input type="checkbox"/> Yes	<b>Manometer used?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Confirm:</b> <input type="checkbox"/> Specimen bottles filled correctly (approx. 6-10 drops each). <input type="checkbox"/> Specimen bottles have been labelled correctly: Grey Vacuette = biochemistry: CSF glucose. 1 = microbiology: CSF for viral PCR (if indicated). 2 = biochemistry: protein. 3 = microbiology: cell count, gram stain and C&S. <input type="checkbox"/> Simultaneous blood glucose sent to biochemistry. <input type="checkbox"/> All samples are correctly labelled with 3 patient identifiers including CRN/NHS number.
<b>Verbal consent obtained from parent with parental responsibility?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes <b>Procedure and risk explained?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes	<b>Confirm 1 grey Vacuette and 3 sterile universal bottles available, labelled '1', '2' and '3' to collect in that order?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No, explain:	
<b>Confirm operator appropriately:</b> <input type="checkbox"/> Trained <b>OR</b> <input type="checkbox"/> Supervised by:	<input type="checkbox"/> Confirm optimal positioning of patient.	
<input type="checkbox"/> Confirm contra-indications for LP excluded.	<input type="checkbox"/> Confirmation of correct site for procedure.	<input type="checkbox"/> Confirm documentation has been completed and CDDFT's lumbar puncture pathway initiated.
<b>Patient position assisted or held by nurse:</b> <input type="checkbox"/> Sitting <input type="checkbox"/> Lateral	<b>Assistant to record:</b> CSF appearance: CSF opening pressure:	
AFFIX BAR CODED PATIENT LABEL HERE	<u>Signature and printed name</u>  Operator: _____ Date: _____ Assistant: _____ Time: _____ Supervisor (if present): _____ Location: _____	Specialty Documents 

# PAEDIATRIC LUMBAR PUNCTURE (LP) CHECKLIST

This **LocSSIP** applies to all paediatric lumbar punctures undertaken in CDDFT.

## Must-do procedural steps

1. To ensure compliance with best practice:
  - a. The operator **must** dispose of all sharps before leaving the procedural area.
  - b. The operator **must** only use the LP needles authorised by the Trust (CDDFT).
2. To reduce the risk of lumbar puncture associated infection:
  - a. The operator **must** wear sterile gloves after scrubbing.
  - b. Tinted Chloraprep 2% in 70% alcohol **must** be used and allowed to dry for 3 minutes.
3. To reduce the risk of cerebrospinal fluid leak:
  - a. When the needle is removed, pressure **must** be applied to the site until leakage stops.
  - b. Advice **must** be given regarding potential complications; e.g. leakage from site, headache, backache.
4. To ensure all samples are appropriately labelled and are received by the laboratory for prompt processing, the operator **must** ensure:
  - a. White topped specimens 1 and 3 are accompanied by a blue 'microbiology' form; Vacurette and specimen bottle 2 accompanied by a biochemistry form.
  - b. That clearly labelled blood glucose is concurrently supplied to the laboratory.
  - c. Samples arrive within 1 hour of being taken. Both Biochemistry AND Microbiology Biomedical Scientists **must** be informed:
    - i. **Biochemistry** contact the laboratory on extension 32439 (UHND) or 43695 (DMH).
    - ii. **Microbiology** routine hours (8am until 8pm weekdays, 8am until 4pm weekends and bank holidays) contact the laboratory on extension 32450 / 32448. All other times contact the microbiology Biomedical Scientist on call via switchboard.
  - d. DMH samples are dispatched to the correct laboratory:
    - i. Normal working days 9am to 4pm; **hand deliver** directly to DMH laboratory. All other times (including weekends and bank holidays); contact both Biochemistry and Microbiology lab personnel at UHND via switchboard. Clinician to arrange taxi to collect samples from the ward for **hand delivery** to UHND lab.
    - ii. Samples **must** be securely transported in an appropriately labelled, rigid, opaque (so no patient identifiable information can be observed), leakproof container. These can be obtained from ED, AMU, paediatric wards or the pathology department. Additional ward stock can be obtained by contacting the Medical Laboratory Assistants in microbiology during routine hours on extension 43242.

Associated guidelines: Care Group Area LocSSIP describing all NatSSIP principals which apply to this invasive procedure and checklist.